

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A X 0 0 0 0 3 8 0 3 4		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal law.									
3. Generator's Name and Mailing Address F.M. THOMAS CO. 231 Gemini Ave., Brea, Ca. 92621						A. State Manifest Document Number 86534518											
4. Generator's Phone (714) 738-1062						B. State Generator's ID CAX000038034											
5. Transporter 1 Company Name F.M. THOMAS CO.						C. State Transporter's ID											
6. US EPA ID Number C A X 0 0 0 0 3 8 0 3 4						D. Transporter's Phone /14/738-1062											
7. Transporter 2 Company Name						E. State Transporter's ID											
8. US EPA ID Number						F. Transporter's Phone											
9. Designated Facility Name and Site Address OMEGA RECOVERY SERVICES 12504 E. Whittier Blvd. Whittier, Ca. 90602						G. State Facility's ID CAD042245001											
10. US EPA ID Number C A D 0 4 2 2 4 5 0 0 1						H. Facility's Phone 213/698-0991											
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.					
a. HAZARDOUS WASTE LIQUID N.O.S , NA 9189 ORM-E (R-11)						1030 DM				P		211					
b.																	
c.																	
d.																	
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above R01											
15. Special Handling Instructions and Additional Information																	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.																	
Printed/Typed Name Don Miller						Signature Don Miller				Month Day Year 							
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name Don Miller				Signature Don Miller				Month Day Year 			
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name				Signature				Month Day Year 			
19. Discrepancy Indication Space RECEIVED 534 lbs.																	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Printed/Typed Name JAVIER HERNANDEZ				Signature Javier Hernandez				Month Day Year 7 22 86			